Project Management Section Letter of Transmittal

massDOT		Date: 4/25/2013 Pro	oject File No:604531
Massachusetts Department of Transportation Highway Division		Contra	ct No: N/A
10 PARK PLAZA, BOSTON, MA 02116		PARS/E.W.O. No: F	P604531 P11
To: Guy Rezendes, P.E.		Re: Maynard/Acton - 25% Design Re-subn	Assabet River Rail Trail, nission
Utility Engineer		Federal Aid	Non-Federal Aid
Attention:		FA Oversight	Non-NHS Roadway
Method: INTERNAL MAIL		☐ NHS Roadway	Highway Project
Attached are the following:		Bridge Project	Multiuse/Bike Path
Quantity <u>Description</u>		Enhancement	☐ Intelligent Trans Sys.
1 Utility Set - Resubmission of 25% D	esign		
12 Utility Submission CD's			2
	<u> </u>		
These documents are forwarded for the follow	wing purpose:		
☐ For Approval ☐ For Review and con	mment 🛭 For	your use Other:	
Please submit Consultant Performance Traffic Review (if applicable): Regulations		ore with all review co	
Consultant: AECOM	Contact: John	F. Schoenfeld 978.905.	2385 Ad Date: 11/5/2016
Remarks: Call me if you require additional in	ifo.		8
Thank you.			
		1	
Signature:	Title	e: Sr. Project	t Manager

NOTE: Please address all return correspondence to Marie J. Rose, P.E., Director of Project Management. Also, please include the Project File Number and the Project Manager's name in the subject heading.

BY,

Print Name: Michael Papadopoulos

BY INTERNAL MAIL,

Copy to:

Phone Number: (617) 973

BY

Sr. Project Manager

Project Management Section Letter of Transmittal

Mass DOT		Date: 4/25/2013 Proj	ect File No:604531
Massachusetts Department of Transportation Highway Division		Contrac	t No: N/A
10 PARK PLAZA, BOSTON, MA 02116		PARS/E.W.O. No: P6	504531 P11
To: Jonathan Gulliver		Re: Maynard/Acton - A 25% Design Re-submi	Assabet River Rail Trail,
District 3 Highway Director	,	Federal Aid	Non-Federal Aid
Attention: Arthur Frost		FA Oversight	Non-NHS Roadway
Method: INTERNAL MAIL		NHS Roadway	Highway Project
Attached are the following:		Bridge Project	Multiuse/Bike Path
Quantity Description		Enhancement	Intelligent Trans Sys.
2 Resubmission of 25% Design			
1 Cost Estimate			
			
These documents are forwarded for the follow	wing purpose:		
☐ For Approval ☐ For Review and con	mment 🛚 For	your use Other:	
Please submit Consultant Performance Traffic Review (if applicable): Regulations	Evaluation Sco	ore with all review com Safety Management	ments. (Directive E-98-001) Signs Signals
Consultant: AECOM	Contact: John F	. Schoenfeld 978.905.23	385 Ad Date: 11/5/2016
Remarks: Please review as soon as possible Hearing.	and provide your	recommendation for the	ne scheduling of the Public
Thank you.			
1, 1)			
Signature:	Title	: Sr. Project 1	Manager

NOTE: Please address all return correspondence to Marie J. Rose, P.E., Director of Project Management. Also, please include the Project File Number and the Project Manager's name in the subject heading.

BY,

Print Name:

Copy to:

Michael Papadopoulos

BY INTERNAL MAIL,

Phone Number: (617) 973-

BY

Project Management Section Letter of Transmittal

₽ massDOT	Date: 4/25/2013 Project File No:604531				
Massachusetts Department of Transportation Highway Division	Contract No: N/A				
10 PARK PLAZA, BOSTON, MA 02116	PARS/E.W.O. No: P604531 P11				
	Re: Maynard/Acton - Assabet River Rail Trail,				
To: Lou Rabito, P.E.	25% Design Re-submission				
Complete Streets Engineer	Federal Aid Non-Federal Aid				
Attention:	FA Oversight Non-NHS Roadway				
Method: INTERNAL MAIL	☐ NHS Roadway ☐ Highway Project				
Attached are the following:	☐ Bridge Project ☐ Multiuse/Bike Path				
Quantity <u>Description</u>	☐ Enhancement ☐ Intelligent Trans Sys.				
1 Resubmission of 25% Design					
These documents are forwarded for the following purpose					
☐ For Approval ☐ For Review and comment ☐	For your use Other:				
Please submit Consultant Performance Evaluation Score with all review comments. (Directive E-98-001) Traffic Review (if applicable): Regulations Lighting Safety Management Signs Signals					
Consultant: AECOM Contact: Jo	hn F. Schoenfeld 978.905.2385 Ad Date: 11/5/2016				
Remarks: Call me if you require additional information.					
Thank you.					
•	a				
11/)					
Signature:	Title: Sr. Project Manager				
Print Name: Michael Papadopoulos	Phone Number: (617)-973- 857-368-9334				
Copy to: BY INTERNAL MAIL, BY,	BY				

NOTE: Please address all return correspondence to Marie J. Rose, P.E., Director of Project Management. Also, please include the Project File Number and the Project Manager's name in the subject heading.